

033004

17707 U.S. PTO

NEW UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket Number	20412-08356	U.S. PTO 033004
		First Named Inventor	Jonathan J. Hull	
		Title	Printer with Audio/Video Localization	
		Express Mail Label No.	EV 301186772 US	22386 10/8 13946

APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)	7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))			
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	8. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)			
3. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small>	Total Pages	49	9. <input type="checkbox"/> Power of Attorney or Authorization of Agent	
<input checked="" type="checkbox"/> Descriptive Title of the Invention <input checked="" type="checkbox"/> Cross Reference(s) to Related Case(s) <input checked="" type="checkbox"/> Statement Regarding Fed Sponsored R & D <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Summary of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawing(s) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim or Claims <input checked="" type="checkbox"/> Abstract of the Disclosure			10. <input type="checkbox"/> 37 CFR 3.73(b) Statement	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets	11	11. <input type="checkbox"/> Preliminary Amendment	
5. Oath or Declaration	12. <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A			
a. <input checked="" type="checkbox"/> New Declaration	Total Pages	3	<input type="checkbox"/> Copies of IDS Citation(s)	
<input checked="" type="checkbox"/> Executed (original or copy)			13. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)			14. <input checked="" type="checkbox"/> Return Postcard	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>			15. <input type="checkbox"/>	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			16. <input type="checkbox"/>	
			17. <input type="checkbox"/>	
ADDRESS TO:				
Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				

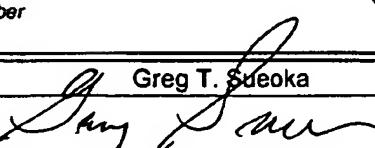
18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 10/001,895

Prior application information: Examiner: Unknown Group/Art Unit: Unknown

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	00758		
Name (Print/Type)	Greg T. Sueoka	Registration No. (Attorney/Agent)	33,800
Signature			Date March 30, 2004

20412/08356/DOCS/1420996.1

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** 1694.00

Complete if Known	
Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Jonathan J. Hull
Examiner Name	Unassigned
Art Unit	Unassigned
Attorney Docket No.	20412-08356

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number **19-2555**

Deposit Account Name **Fenwick & West LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee	Fee	Fee	Fee Description	Fee Paid
Code (\$)	Code (\$)	Code (\$)		
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee
SUBTOTAL (1)		(\$)	770	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims	Fee from below	Fee Paid
50 -20*** = 30	x 18	= 540
7 -3*** = 4	x 86	= 344

Large Entity Small Entity

Fee	Fee	Fee	Fee Description
Code (\$)	Code (\$)	Code (\$)	
1202	18	2202	9
			Claims in excess of 20
1201	86	2201	43
			Independent claims in excess of 3
1203	290	2203	145
			Multiple dependent claim, if not paid
1204	86	2204	43
			**Reissue independent claims over original patent
1205	18	2205	9
			**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$)	884.00

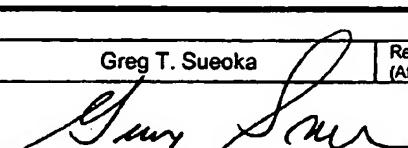
*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee	Fee	Fee	Fee
Code (\$)	Code (\$)	Code (\$)	
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	185
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1480	130	1480	130
1807	50	1807	50
1808	180	1808	180
8021	40	8021	40
1809	770	2809	385
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
Other fee (specify) _____			
SUBTOTAL (3)		(\$)	40.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)	Greg T. Sueoka	Registration No. (Attorney/Agent)	33,800	Telephone	(650) 335-7194
Signature			Date	March 30	, 2004